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FEC FORM 2

STATEMENT OF CANDIDACY

| 1. | (a) Name of Candidate (in full) | | | | | | | | | | |
|---|---|----------------------------|------------------------|--|--|-----------------------|---------------|----------|------|---------|--|
| | Vicky Hartzler | | | 2. Candidata's EEC Idantification Number | | | | | | | |
| | (b) Address (number and street) 30218 S Pleasant Ridge Rd | ☐ Check if address changed | | | 2. Candidate's FEC Identification Number H0MO04086 | | | | | | |
| | (c) City, State, and ZIP Code | | | | | 3. Is This | New | | | Amended | |
| | Harrisonville | | | | | Statement | X (N) | OR | Ш | (A) | |
| 4. | Party Affiliation | 5. Office Soug | ht | | | rict of Candidate | | | | | |
| | REPUBLICAN PARTY | House | | | МО | 04 | | | | | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | | | | | | | | | | |
| 7. | I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election) | | | | | | | | | | |
| | NOTE: This designation should be filed with the appropriate office listed in the instructions. | | | | | | | | | | |
| | (a) Name of Committee (in full) | | | | | | | | | | |
| Vicky Hartzler for Congress | | | | | | | | | | | |
| | (b) Address (number and street) PO Box 531 | | | | | | | | | | |
| | (c) City, State, and ZIP Code | | | | | | | | | | |
| | Harrisonville | | | | MO | 64701 | | | | | |
| | | | | | | | | | | | |
| | DE | CICNATIO | N OF OT | IIED ALI | TUODIZED | COMMUTTE | F0 | | | | |
| DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) | | | | | | | | | | | |
| 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. | | | | | | | | | | | |
| NOTE: This designation should be filed with the principal campaign committee. | | | | | | | | | | | |
| (a) Name of Committee (in full) | | | | | | | | | | | |
| | | | | | | | | | | | |
| | (b) Address (number and street) | | | | | | | | | | |
| | (b) Address (number and street) | | | | | | | | | | |
| | | | | | | | | | | | |
| (c) City, State, and ZIP Code | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | I certify that I have exa | mined this State | ement and to | the best of | my knowledge a | and belief it is true | e, correct ar | nd compl | ete. | | |
| Signature of Candidate Date | | | | | | | | | | | |
| V_{i} | icky Hartzler | | [Electronically Filed] | | | | 01/24/2015 | | | | |
| | | | | LEtec | ironically Pueus | | | | | | |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g. | | | | | | | | | | | |
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FEC FORM 2 (REV. 02/2009)